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Notice of Serious Incident

Date of Incident: 1/3/2023

Date Received by DCCECE: 1/4/2023

Facility Name: Millcreek of Arkansas PRTF

Facility Number: 233

Facility Type: Residential

Incident Type: Licensing

Report Description: (West Virginia, DHHR Custody, DOB:) reported to staff members that at 6:30pm, she had removed the batteries from a television remote and swallowed them. Nurse assessment was conducted and no distress or breathing difficulty was noted. She was sent to ER for evaluation and x-ray. X-ray report states a metallic foreign body was present in the stomach. No obstructions were noted. Doctor orders

Interim Action Narrative:

Maltreatment Narrative:

Outcome:

Licensing Narrative: Client **Client** reported to staff that she had swallowed the batteries from a television remote. Client was taken to ER and X-ray performed yielding

. for additional X-ray. Facility informed licensing 1/13/23 that on 1/5/23 and X-ray follow up was performed .

. No follow up appointment needed.

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